

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No.	1663/00193
First Named Inventor or Application Identifier	Garry Taylor et al.
Title	THREE DIMENSIONAL STRUCTURE OF PARAMYXOVIRUS HEMAGGLUTININ- NEURAMINIDASES AND USE THEREOF
Express Mail Label No.	

07/27/04  
07/27/04

## APPLICATION ELEMENTS

1.  Filing fee as calculated below.

2.  Applicant claims small entity status  
See 37 CFR 1.27.

3.  Specification [Total Pages **[23]**]  
*(preferred arrangement set forth below)*  

- Descriptive title of the invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the invention
- Brief Description of the Drawings (*if filed*)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4.  Drawing(s) *(35 USC 113)* [Total Pages **[6]**]

5.  Oath or Declaration [Total Pages **[ ]**]  

- a.  Newly executed (original or copy)
- b.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 16 completed)*

6.  Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Commissioner for Patents  
Box Applications  
Washington, D.C. 20231

1597 U.S. PRO  
09/915515  
07/27/11

7.  Microfiche Computer Program (Appendix)

8.  Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)

a.  Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i.  CD-ROM or CD-R (2 copies); or

ii.  paper

c.  Statements verifying identity of above copies

## **ACCOMPANYING APPLICATION PARTS**

9.  Assignment papers (cover sheet & document(s))

10.  37 CFR 3.73(b) Statement  Power of Attorney  
*(when there is an assignee)*

11.  English Translation Document (*if applicable*)

12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS  
Citations

13.  Preliminary Amendment

14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*

15.  Certified copy of Priority Document(s)  
*(if foreign priority is claimed)*

16.  Other:

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR § 1.76.:

Continuation     Divisional     Continuation-in-part (CIP) of prior application No. \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group/Art Unit \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label

*(Insert Customer No. or Attach bar code label here)*

or  correspondence address below

NAME

Connolly Bove Lodge & Hutz LLP

Suite 800

**1990 M Street, N.W.**

ADDRESS	Suite 800 1990 M Street, N.W.				
	Washington	STATE	DC	ZIP CODE	20036-3425
CITY	U.S.A	TELEPHONE	(202) 331-7111	FAX	(202) 293-6229
COUNTRY					

**Fee Calculation and Transmittal**

	(Col 1) NO. FILED	(Col 2)	(Col 3) NO. EXTRA	SMALL ENTITY		OR	NON-SMALL ENTITY	
				RATE	Fee		RATE	Fee
TOTAL	21	minus	20	= 1	\$9		x18=	\$
INDEP	4	minus	3	= 1	\$40		x80=	\$
		<u>First Presentation, Multiple Dependent Claims</u>			\$		+270=	\$
		<b>Base Filing Fee</b>			\$355			\$710
		<b>Other Fee (specify purpose)</b>			\$			\$
		TOTAL FILING FEE* (accounting for possible small entity status)			\$404	OR	<b>TOTAL</b>	\$

A check in the amount of \$404 to cover the filing fee is enclosed  
 No payment is enclosed at this time. Full payment will be made when the executed Declaration is submitted.  
 The Director is hereby authorized to charge and credit Deposit Account No. 22-0185 as described below. A duplicate copy of this sheet is enclosed.

Charge the amount of \$\_\_ as filing fee  
 Credit any overpayment.  
 Charge any additional filing fees required under 37 CFR § 1.16  
 Charge any additional filing fees required under 37 CFR § 1.17  
 If filing fee is not enclosed herewith, the filing fee(s) required to Deposit Account No. 22-0185.

FEE CALCULATION

Name (Print/Type)	Burton A. Amernick	Registration No. (Attorney/Agent)	24,852
Signature	<i>Burton A. Amernick</i>	Date 7/27/01	

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: :  
Garry Taylor et al :  
Serial No.: To be assigned : Art Unit: To be assigned  
Filed: Herewith : Examiner: To be assigned  
For: THREE DIMENSIONAL : Atty Docket: 1663/00193  
STRUCTURE OF :  
PARAMYXOVIRUS :  
HEMAGGLUTININ- :  
NEURAMINIDASES AND USE :  
THEREOF :  
:

## **STATEMENT OF IDENTITY**

Commissioner for Patents  
Washington, D.C. 20231

Sir:

Attached are a paper copy and a CRF copy of the sequence listing in the above-referenced case. The undersigned hereby states that the contents of the two copies are identical.

Respectfully submitted,

Stanley B. Green  
24, 35

Burton A. Amernick (24,852)  
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Washington, D.C. 20036-3425  
Telephone: 202-331-7111

Date: